

IN THE INTEREST OF

**Acknowledgment of
Dispositional
Conditions and Sanctions
(Delinquency/JIPS)**_____
Name_____
Date of Birth

Case No. _____

1. I am the juvenile. The court has imposed a dispositional order in this case.
2. I ☐ have read ☐ have had read to me the conditions of that dispositional order.
3. I understand the conditions of the order I must obey.
4. I understand that if I violate the order, the court could order one or more of the following sanctions:
 - Place me in a juvenile detention facility or the juvenile portion of a county jail for up to ten days with educational services. (*delinquency only*)
 - Place me in nonsecure custody for up to ten days with educational services.
 - Suspend or limit the use of my operating privilege (driver's license) or any Department of Natural Resources approval for a period of up to three years.
 - Detain me in my home or current residence for up to 30 days under rules of supervision, including electronic monitoring.
 - Perform up to 25 hours without pay in a supervised work program or other community service.
5. I understand that if my caseworker is investigating whether I violated the order, my caseworker may, without a hearing, place me for up to 72 hours in:
 - A juvenile detention facility. (*delinquency only*)
 - The juvenile portion of a county jail. (*delinquency only*)
 - Nonsecure custody.
6. I understand that if I violate the order or my after care status, my caseworker may, without a hearing, place me for up to 72 hours in:
 - A juvenile detention facility. (*delinquency only*)
 - The juvenile portion of a county jail. (*delinquency only*)
 - Nonsecure custody.

Signature of Caseworker_____
Signature of Juvenile_____
Name Printed or Typed_____
Name Printed or Typed_____
Date_____
Date

Distribution:

1. Original - Juvenile Clerk
2. Caseworker
3. Juvenile/Juvenile's attorney
4. Juvenile's parents